## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

indicated unless corrected in maintenance fee notification	below or directed otherwise is.	in Block I, by (a)	specifying a	new correspondence	address;	and/or (b) indicating a sep	arate "FEE ADDRESS" for		
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
23117 75	90 02/07/2006			have its own co	ertificate	of mailing or transmission.			
						Certificate of Mailing or Transmission			
NIXON & VANI 901 NORTH GLEI ARLINGTON, VA	I hereby certif States Postal S addressed to transmitted to	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
,				(Depositor's name)					
			(Signature)						
							(Date)		
APPLICATION NO.	FILING DATE	FIRST NAMED		D INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/892,512 06/28/2001			Tatsuo Nomura			1114-165	4932		
TITLE OF INVENTION: P	ROGRAM SUPPLYING SY	STEM AND PRO	GRAM SUPF	LYING METHOD					
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FE	EE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400		\$300		\$1700	05/08/2006		
EXAMINER		ART UNIT		CLASS-SUBCLAS	SS				
LUU, LE HIEN		2141	719-327000						
<ol> <li>Change of correspondenc CFR 1.363).</li> </ol>	•	ting on the patent front		ı Nivon	& Vanderhye, PO				
Change of correspond Address form PTO/SB/1	dence address (or Change of 22) attached.	Correspondence	or agents (	nes of up to 3 register DR, alternatively,	•	attorneys			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or type)					
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be a 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	lata will app `a substitute	ear on the patent. If a for filing an assignmen	n assigne nt.	e is identified below, the c	document has been filed for		
(A) NAME OF ASSIGN	EE		(B) RESIDE	NCE: (CITY and STA	12 Mg/128	186 <sup>v</sup> Hybexenes 0000000	C 0303CUIL		
SHARP KABUSHIKI KAISHA			Osaka, Japan 91 FC:1			5 <b>91</b> 504	1400.00 UP 300.00 OP		
Please check the appropriate	e assignee category or catego	ries (will not be pri	nted on the p	atent): 🗖 Individua	13 KI-68	poration or other private gr	oup entity Government		
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):									
X Issue Fee	A check in the amount of the fee(s) is enclosed.								
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form).								
	(from status indicated above MALL ENTITY status. See	•	Dh Annlin	ont is no longer eleimic	na SMAI	L ENTITY status. See 37 C	SER 1.27(a)(2)		
	is requested to apply the Issu				_				
NOTE: The Issue Fee and P interest as shown by the reco	by requested to apply the issifublication Fee (if required) vords of the United States Pate	vill not be accepted ent and Trademark	from anyone Office.	other than the applica	nt; a regis	tered attorney or agent; or t	he assignee or other party in		
Authorized Signature	Mirkael G	Then		Date	MA	AY 2, 2006			
Typed or printed name Michael J Shea			Registration No. 34,725						
This collection of informatic an application. Confidential submitting the completed at this form and/or suggestions Box 1450, Alexandria, Virg Alexandria, Virginia, 22312	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. oplication form to the USPTs for reducing this burden, st inia 22313-1450. DO NOT 1.450	11. The information 122 and 37 CFR 1 O. Time will vary nould be sent to the SEND FEES OR C	n is required .14. This coldepending up Chief Inform OMPLETED	to obtain or retain a ber lection is estimated to lection the individual case nation Officer, U.S. Par FORMS TO THIS AI	nefit by th take 12 m to Any cor tent and 1 DDRESS.	e public which is to file (an inutes to complete, including nments on the amount of ti rademark Office, U.S. Dep SEND TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.